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UNITED STATES DISTRICT COURT, NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

Plaintiff(s)

Sakie Scott

FILED

J.N.

MAY X 5 2008

Case Number:

08 CV 1457

v.

Defendant(s)

ILLINOIS STATE

MAY 5, 2008

MICHAEL W. DOE NS
CLERK, U.S. DISTRICT COURT

Judge:

Lugel

(ISME) MEDICAL INSURANCE
SERVICES, INC.

MOTION FOR APPOINTMENT OF COUNSEL

[NOTE: Failure to complete all items in this form may result in the denial of the motion for appointment of counsel]

1. I, Sakie Scott, declare that I am the (check appropriate box)
☒ plaintiff ☐ defendant in the above-entitled proceeding and state that I am unable to afford the services of an attorney, and hereby request the Court to appoint counsel to represent me in this proceeding.

2. In support of my motion, I declare that I have made the following attempts to retain counsel to represent me in this proceeding [NOTE: This item *must* be completed]:

Legal Assistance Foundation - Lynette Lewis, ESQ
 Jeffrey Friedman,

3. In further support of my motion, I declare that (check appropriate box):

☒ I am not currently, nor previously have been, represented by an attorney appointed by the Court in this or any other civil or criminal proceeding before this Court.

☐ I am currently, or previously have been, represented by an attorney appointed by the Court in the proceeding(s) described on the back of this page.

4. In further support of my motion, I declare that (check appropriate box):

☐ I have attached an original Application for Leave to Proceed *In Forma Pauperis* in the proceeding detailing my financial status.

☐ I have previously filed an Application for Leave to Proceed *In Forma Pauperis* in this proceeding, and it is a true and correct representation of my financial status.

☐ I have previously filed an Application for Leave to Proceed *In Forma Pauperis* in this proceeding. However, my financial status has changed and I have attached an Amended Application to Proceed *In Forma Pauperis* to reflect my current financial status.

5. I declare under penalty that the foregoing is true and correct.

Movant's Signature

Date

Street Address

City, State, ZIP

669 Clyde Ave #2N

Calumet City, IL

60409